LEGISLATIVE AUDITOR
2002 DEC 27 AT 10: 54

ALLEN PARISH HOSPITAL

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court.

Release Date 1/29/03

FOR THE YEARS ENDED JUNE 30, 2002, 2001 AND 2000

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Years Ended June 30, 2002, 2001 and 2000

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INDEPENDENT AUDITORS' REPORT

Board of Commissioners
Hospital Service District No. 3
Parish of Allen, State of Louisiana
Kinder, Louisiana

We have audited the accompanying general purpose financial statements of Hospital Service District No. 3, Parish of Allen, State of Louisiana, Allen Parish Hospital (the "District"), a component unit of the Allen Parish Police Jury, as of and for the years ended June 30, 2002, 2001 and 2000, as listed in the foregoing table of contents. These general purpose financial statements are the responsibility of the District's management. Our responsibility is to express an opinion on these general purpose financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the general purpose financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the general purpose financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall general purpose financial statement presentation. We believe that our audits provide a reasonable basis for our opinions.

In our opinion, the general purpose financial statements referred to above present fairly, in all material respects, the financial position of Hospital Service District No. 3, Parish of Allen, Allen Parish Hospital, as of and for the years ended June 30, 2002, 2001 and 2000, and the results of its operations and cash flows for the periods then ended, in conformity with accounting principles generally accepted in the United States of America.

In accordance with <u>Government Auditing Standards</u>, we have also issued a report dated November 6, 2002, on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grants. That report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> and should be read in conjunction with this report in considering the results of our audits.

Board of Commissioners Hospital Service District No. 3 Parish of Allen, State of Louisiana Page Two

The accompanying general purpose financial statements have been prepared assuming that the District will continue as a going concern. As discussed in Note 13 to the general purpose financial statements, the District has had significant deficiencies noted during a state survey, a limited number of active medical staff physicians, and decreasing patient utilization of the hospital. These conditions raise substantial doubt about its ability to continue as a going concern. Management's plans regarding those matters are also described in Note 13. The general purpose financial statements do not include any adjustments that might result from the outcomes of these uncertainties.

Our audits were conducted for the purpose of forming an opinion on the general purpose financial statements taken as a whole. The supplementary information listed in the foregoing table of contents is presented for purposes of additional analysis and is not a required part of the general purpose financial statements of Hospital Service District No. 3, Parish of Allen, Allen Parish Hospital. Such information has been subjected to the auditing procedures applied in the audits of the general purpose financial statements, and in our opinion, is fairly presented in all material respects in relation to the general purpose financial statements taken as a whole.

Certified Public Accountants

Lester, Miller EWells

November 6, 2002

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Balance Sheets - Unrestricted Fund June 30, 2002, 2001 and 2000

	2002	2001	2000
Assets Current assets:			
Cash and cash equivalents Investments	\$ 988,673 184,234	\$ 1,051,451 176,851	\$ 723,572 24,661
Patient accounts receivable, net of estimated uncollectibles (Note 4) Estimated Medicare and Medicaid program	362,121	241,481	393,192
settlements	-0-	-0-	2,142
Inventory	138,215	121,252	115,839
Prepaid expenses	<u>38,852</u>	<u>24,535</u>	8,529
Total current assets	<u>1,712,095</u>	1,615,570	_1,267,935
Property, plant and equipment, net (Note 5)	802,342	920,576	829,892
Assets limited as to use (Note 6)	-0-	-0-	125,000
Other assets	<u> 15,000</u>		1,242
Total assets	\$ <u>2,529,437</u>	\$ <u>2.536.146</u>	\$ <u>2.224,069</u>
Liabilities and Fund Balance Current liabilities:			
Current maturities of long-term debt (Note 8)	\$ 81,105	\$ 90,035	\$ 79,977
Accounts payable	400,642	501,439	676,568
Accrued expenses	110,602	91,486	91,765
Estimated Medicare and Medicaid program settlements	<u>365,083</u>	346,378	<u>-0-</u>
Total current liabilities	957,432	1,029,338	848,310
Long-term debt, net of current maturities (Note 8)	189,450	239,919	225,799
Total liabilities	1,146,882	1,269,257	_1,074,109
Fund balance: Unrestricted	_1,382,555	1,266,889	1,149,960
Total liabilities and fund balance	\$ <u>2.529,437</u>	\$ <u>2,536,146</u>	\$ <u>2.224.069</u>

See accompanying notes to financial statements.

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Statements of Operations - Unrestricted Fund Years Ended June 30, 2002, 2001 and 2000

	2002	2001	2000
Revenue: Net patient service revenue Maintenance taxes Other	\$ 3,592,281 103,405 80,446	\$ 3,415,502 87,404 <u>150,988</u>	\$ 4,189,998 89,707 154,630
Total revenue	3,776,132	3,653,894	_4 <u>,434,335</u>
Expenses: Salaries and benefits Medical supplies and drugs Supplies Professional, management and consulting fees Other expenses Insurance Interest expense Depreciation and amortization Provision for bad debts	2,048,987 196,667 396,889 364,203 321,450 123,199 24,776 134,852 70,389	1,994,000 189,674 353,309 392,671 366,654 92,101 30,351 119,800 91,831	1,807,660 232,529 299,561 893,875 372,949 96,578 36,699 115,698 825,141
Total expenses	3,681,412	<u>3,630,391</u>	<u>4,680,690</u>
Operating income (loss)	94,720	23,503	(246,355)
Nonoperating income Interest income	20,946	<u>43,426</u>	21,053
Excess of revenues over expenses	\$ <u>115,666</u>	\$ <u>66.929</u>	\$ <u>(225,302)</u>

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Statements of Changes in Fund Balance Years Ended June 30, 2002, 2001 and 2000

	UNRESTRICTED
Fund balance, June 30, 1999	\$ 1,375,262
Excess of revenues over expenses	(225,302)
Fund balance, June 30, 2000	1,149,960
Excess of revenues over expenses	66,929
Transfer from Allen Parish Police Jury	50,000
Fund balance, June 30, 2001	1,266,889
Excess of revenues over expenses	115,666
Fund balance, June 30, 2002	\$ <u>1,382,555</u>

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Statements of Cash Flows - Unrestricted Funds Years Ended June 30, 2002, 2001 and 2000

	2002		2001		2	2000
Cash flows from operating activities	\$	94,720	\$	23,503	\$	(246,355)
Operating income (loss) Interest expense considered capital financing	Ψ	3 7 ,120	Ψ	20,000	Ψ	(240,000)
activity		24,776		30,351		36,699
Adjustments to reconcile operating income to net		21,110		00,001		55,500
cash provided by operating activities						
Depreciation and amortization		134,852		119,800		115,698
Provision for bad debts		70,389		91,831		825,141
Transfer from Allen Parish Police Jury		-0-		50,000		-0-
Changes in				,		
Patient accounts receivable		(191,029)		59,880		(798, 989)
Due from related party		` -0-´		- 0-		798,131
Estimated Medicare and Medicaid program						
settlements		18,705		348,520		398,781
Inventory		(16,963)		(5,413)		23,629
Prepaid expenses		(14,317)		(16,006)		8,555
Deposit		-0-		-0-		8,000
Accounts payable		(100,797)		(175,129)		(906,360)
Accrued expenses		19,116		(279)		(12,125)
Net cash used by operating activities		39,452		527,058	_	250,805
Cash flows from investing activities						
Interest on investments		20,946		43,426		21,053
Assets whose use is limited		-0-		125,000		-0-
Loans to physicians		(15,000)		-0-		-0-
Cash invested in certificates of deposit		(7,383)	_	(152,190)	_	(4,661)
Net cash provided by investing activities	\$	(1,437)	\$	16,236	\$_	16,392

See accompanying notes to financial statements.

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Statements of Cash Flows - Unrestricted Funds (Continued) Years Ended June 30, 2002, 2001 and 2000

	2002	2001	2000
Cash flows from capital and related financing activities Principal payments on long-term debt Interest expense on long-term debt Proceeds from long-term debt Acquisition of capital assets	\$ (59,399) (24,776) -0- (16,618)	\$ (59,599) (30,351) 20,000 (145,465)	\$ (64,160) (36,699) -0- (6,841)
Net cash used by capital and related financing activities	(100,793)	(215,415)	(107,700)
Net increase (decrease) in cash and cash equivalents	(62,778)	327,879	159,497
Cash and cash equivalents, beginning of year	_1,051,451	<u>723,572</u>	564,075
Cash and cash equivalents, end of year	\$ <u>988,673</u>	\$ <u>1,051,451</u>	\$ <u>723.572</u>
Supplemental disclosures of cash flow information:			
Cash paid during the period for interest	\$ <u>24.945</u>	\$ <u>30.553</u>	\$ <u>36.882</u>

The Hospital entered into various capital lease obligations for \$63,778 in 2001.

NOTE 1 - ORGANIZATION AND OPERATIONS

Legal Organization

The Allen Parish Hospital Service District No. 3 (the "Hospital" or the "District") was created by an ordinance of the Allen Parish Police Jury.

The Hospital is a political subdivision of the Allen Parish Police Jury whose jurors are elected officials. The Hospital's commissioners are appointed by the Allen Parish Police Jury. As the governing authority of the Parish, for reporting purposes, the Allen Parish Police Jury is the financial reporting entity for the Hospital. Accordingly, the Hospital was determined to be a component unit of the Allen Parish Police Jury based on statement No. 14 of the National Committee on Governmental Accounting. The accompanying financial statements present information only on the funds maintained by the governmental services provided by that governmental unit or the other governmental units that comprise the financial reporting entity.

Nature of Business

The District provides outpatient, skilled nursing (through "swing-beds"), home health, acute inpatient and psychiatric hospital services.

Hospital Land

The land on which the Hospital was built was donated by Powell Lumber Company to Allen Parish Hospital Service District No. 3. The donation was made with the restriction that the land is to be used primarily as a site for a public hospital and should the donee or their successors or assignees fail to use the land for a public hospital, the title shall revert to Powell Lumber Company.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Enterprise Fund

Enterprise funds are used to account for operations that are financed and operated in a manner similar to private business enterprises - where the intent of the governing body is that the costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Method of Accounting

The Hospital uses the accrual method of accounting. Revenue is recorded when earned and expenses are recorded when incurred. Hospital accounting and reporting procedures also conform to the requirements of Louisiana Revised Statute 24:514 and to the guide set forth in the Louisiana Governmental Audit Guide, the AICPA Audit and Accounting Guide - Health Care Organizations, published by the American Institute of Certified Public Accountants, and standards set by the Governmental Accounting Standards Board (GASB), which is the accepted standard-setting body for establishing governmental accounting and financial reporting principles.

Net Patient Service Revenue

Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

Cash and Cash Equivalents

Cash and cash equivalents consist primarily of deposits in checking, money market accounts and certificates of deposit with original maturities of 90 days or less. Certificates of deposit with original maturities of more than 90 days are classified as investments. Cash and cash equivalents are stated at cost, which approximates market value. The caption "cash and cash equivalents" does not include amounts whose use is limited or temporary cash investments.

Credit Risk

The District provides medical care primarily to Allen Parish residents and grants credit to patients substantially all of whom are local residents.

The Hospital's estimate of collectibility is based on evaluation of historical collections compared to gross charges and an analysis of aged accounts receivable to establish an allowance for uncollectible accounts.

Significant Concentration of Economic Dependence

The Hospital has an economic dependence on a small number of staff physicians who admit over 90% of the Hospital's patients.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Third Party Cost-Based Revenues

Contractual agreements with governmental agencies provide for reimbursement based on a fixed price per patient stay based upon the patient's primary diagnosis for Medicare inpatient services and on a fixed price per patient day for Medicaid inpatient services. Medicaid outpatient and Medicare inpatient psychiatric services are reimbursed based upon the lesser of reasonable cost (subject to certain limits) or charges to patients. Medicare home health reimbursement changed to prospective payment system October 1, 2000. Medicare outpatient reimbursement changed to prospective system effective August 1, 2000. Small rural hospitals are afforded a "hold harmless" status whereby the Hospital will receive the greater of the prospective payments or cost based reimbursement with reduction based upon the District's 1996 payment to cost ratio for the next three years. These reimbursements are subject to audit and retroactive adjustments by each payor.

Inventory

Inventories are stated at the lower of cost, determined by the first-in, first-out method, or market basis.

Income Taxes

The entity is a political subdivision and exempt from taxation.

Property, Plant and Equipment

Property, plant and equipment is recorded at cost for purchased assets or at fair market value on the date of any donation. The Hospital uses straight-line depreciation for financial reporting and third party reimbursement. The following estimated useful lives are generally used.

Buildings 12 to 40 years
Machinery and Equipment 3 to 20 years
Furniture and Fixtures 3 to 20 years

Expenditures for additions, major renewals and betterments are capitalized and expenditures for maintenance and repairs are charged to operations as incurred.

The cost of assets retired or otherwise disposed of and related accumulated depreciation are eliminated from the accounts in the year of disposal. Gains or losses resulting from property disposals are credited or charged to operations currently.

NOTE 3 - DEPOSITS

Included in cash and cash equivalents, investments and assets whose use is limited are cash on hand, deposits with the depository banks for money market accounts, checking accounts and certificates of deposit. For all deposits, the market value and carrying value are the same. The deposits are insured by the FDIC and collateral held by the pledging financial institution's trust departments in the District's name.

NOTE 4 - ACCOUNTS RECEIVABLE

A summary of accounts receivable is presented below:

	2002	2001	2000
Net patient accounts receivable Other receivables	\$ 434,948 173 435,121	\$ 339,152 <u>329</u> 339,481	\$ 535,295 1,897 537,192
Estimated uncollectibles	(73,000)	(98,000)	(144,000)
Total	\$ <u>362,121</u>	\$ <u>241.481</u>	\$ <u>393.192</u>

The Hospital generated a substantial portion of its charges from Medicare and Medicaid programs at discounted rates. The following is a summary of gross Medicare and Medicaid patient charges:

	2002	2001	2000
Medicare patients Medicaid patients	\$ 2,321,475 <u>4,055,987</u>	\$ 2,676,218 2,779,893	\$ 2,700,530 _2,271,185
Total	\$ <u>6.377,462</u>	\$ <u>5,456,111</u>	\$ <u>4.971.715</u>
Percent of all patients	<u>94%</u>	<u>87%</u>	<u>78%</u>

The Hospital received interim amounts of \$187,926, \$428,659, and \$274,514 for Medicaid and self-pay uncompensated care services for the years ended June 30, 2002, 2001 and 2000, respectively. The interim amounts received are based upon uncompensated cost incurred in previous years. Current regulations require retroactive audit of the claimed uncompensated cost and comparison to the interim amounts paid by Medicaid in each fiscal year. Any overpayments will be recouped by Medicaid. Management estimated that the Hospital was overpaid by \$288,000 and \$55,000 during the years ended June 30, 2001 and 2000, respectively and has made provisions for such recoupments. To the extent management's estimates differ from actual results, the differences will be used to adjust income for the period when differences arise.

NOTE 5 - PROPERTY, PLANT AND EQUIPMENT

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended June 30, 2002.

		I 00			
	June 30, <u>2001</u>	•		June 30, 2002	
Land Land improvements Buildings Fixed equipment Major movable equipment	\$ 19,550 30,617 1,395,722 58,519 _1,433,414	\$ -0- -0- 6,791 1,813 8,014	\$ -0- -0- -0- -0- -0-	\$ 19,550 30,617 1,402,513 60,332 	
Totai	\$ <u>2,937,822</u>	\$ <u>16,618</u>	\$ <u>-0-</u>	\$ <u>2.954.440</u>	
	A	CCUMULATED	DEPRECIATION		
	June 30, <u>2001</u>	•			
•	2001	Additions	Deductions	2002	
Land improvements Buildings Fixed equipment Major movable equipment	\$ 28,836 831,074 49,451 <u>1,107,885</u>	\$ 588 42,692 2,646 88,926	\$ -0- -0- -0- -0-	\$ 29,424 873,766 52,097 <u>1,196,811</u>	
Total	\$ <u>2.017,246</u>	\$ <u>134,852</u>	\$ <u>-0-</u>	\$ <u>2.152,098</u>	

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended June 30, 2001.

	ASSET COST								
		June 30, <u>2000</u>		Additions		Deductions		June 30, <u>2001</u>	
Land	\$	19,550	\$	-0-	\$	-0-	\$	19,550	
Land improvements		30,617		-0-		-0-		30,617	
Buildings	1	,382,720		13,002		-0-	1	,395,722	
Fixed equipment		58,519		-0-		-0-		58,519	
Major movable equipment		,237,175		<u>196,239</u>		-0-	_1	<u>,433,414</u>	
Total	\$_2	2.728.581	\$	209.241	\$	-0-	\$ <u>_2</u>	.937.822	

NOTE 5 - PROPERTY, PLANT AND EQUIPMENT (Continued)

	ACCUMULATED DEPRECIATION							
		June 30, 2000 Additions		Deductions		June 30, <u>2001</u>		
Land improvements Buildings Fixed equipment Major movable equipment	\$	28,248 790,068 46,906 1,033,467	\$	588 41,006 2,545 74,418	\$	-0- -0 - -0- <u>-0-</u>	\$	28,836 831,074 49,451 L,107,885
Total	\$	1.898.689	\$	<u>118,557</u>	\$	-0-	\$ <u>_</u> 2	2,017,246

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended June 30, 2000.

	l	June 30,		
	June 30, <u>1999</u>	<u>Additions</u>	Deductions	2000
Land Land improvements Buildings Fixed equipment Major movable equipment	\$ 19,550 30,617 1,382,720 58,519 1,251,017	\$ -0- -0- -0- -0- 6,841	\$ -0- -0- -0- -0- 20,683	\$ 19,550 30,617 1,382,720 58,519 _1,237,175
Total	\$ <u>2.742.423</u>	\$ <u>6.841</u>	\$ <u>20,683</u>	\$ <u>2,728,581</u>
	AC	June 30,		
	June 30, <u>1999</u>	<u>Additions</u>	Deductions	2000
Land improvements Buildings Fixed equipment Major movable equipment	\$ 27,422 748,685 44,237 987,059	\$ 825 41,381 2,670 67,093	\$ -0- -0- -0- 20,683	\$ 28,247 790,066 46,907 1,033,469
Total	\$ <u>1.807.403</u>	\$ <u>111,969</u>	\$ <u>20,683</u>	\$ <u>1.898.689</u>

NOTE 5 - PROPERTY, PLANT AND EQUIPMENT (Continued)

A summary of assets held under capital leases, which are included in property, plant and equipment, at June 30 follows:

	2002	2001	2000
Equipment Accumulated depreciation	\$ 330,931 (223,009)	\$ 330,931 (169,396)	\$ 267,153 (120,313)
Total	\$ <u>107.922</u>	\$ <u>161,535</u>	\$ <u>146.840</u>

NOTE 6 - ASSETS LIMITED AS TO USE

Assets whose use is limited that are required for obligations classified as current liabilities are reported in current assets. The composition of assets whose use is limited is summarized in the following table. Investments are stated at cost that approximates market.

	2002	2001	2000
Under malpractice funding arrangement - held by trustee: Certificates of deposit	\$	\$ <u>-0-</u>	\$ <u>125.000</u>
NOTE 7 - ACCRUED EXPENSES			
A summary of accrued expenses follows:			
	2002	2001	2000
Salaries Payroll taxes Other	\$ 104,254 4,249 <u>2,099</u>	\$ 85,104 4,123 2,259	\$ 85,155 3,824 <u>2,786</u>
Total	\$ <u>110.602</u>	\$ <u>91,486</u>	\$ <u>91.765</u>

NOTE 8 - LONG-TERM DEBT

A summary of long-term debt, including capital lease obligations, at June 30, 2002, 2001 and 2000, follows:

5.05 percent Certificates of Indebtedness, Series		2002		2001		2000	
1998, due March 1, 2007, collateralized by a pledge of tax revenues	\$	62,000	\$	72,000	\$	82,000	
8.75 percent note payable, 60 monthly payments of \$359.01, collateralized by nurses call system, with a book value of \$17,667 at June 30, 2002		15,272		19,378		-0-	
9.00 percent note payable due September 30, 2011, unsecured		75,591		80,543		85,070	
Capital lease obligations, at varying rates of imputed interest from 9.25 percent to 24.60 percent collateralized by leased equipment with a							
book value of \$107,922 at June 30, 2002		117,692	_	158,033		138,706	
Total long-term debt	2	270,555		329,954		305,776	
Less current portion of long-term debt		81,105		90,035		79,977	
Long-term debt, net of current maturities	\$ <u></u> 1	89,450	\$	239,919	\$	225.799	

Scheduled principal repayments on long-term and payments on capital obligations for the next five years are as follows:

Year Ending June 30,	Long-TermDebt	Capital Lease Obligations
2003 2004 2005 2006 2007 2008 - 2011 Totals	\$ 20,469 21,985 22,665 23,684 21,812 42,248 \$ 152,863	\$ 70,038 35,550 18,879 11,041 -0- 135,508
Less amount representing interes	t on capital lease obligations	<u> 17,816</u>
Total		\$ <u>117.692</u>

NOTE 8 - LONG-TERM DEBT (Continued)

The assets and liabilities under capital leases are recorded at the fair value of the asset. The assets are depreciated over their estimated productive lives. Depreciation of assets under capital leases is included in depreciation expense.

NOTE 9 - OPERATING LEASES

Leases that do not meet the criteria for capitalization are classified as operating leases with related rental charged to operations as incurred. The following is a schedule by year of future minimum lease payments under operating leases as of June 30, 2002, that have initial or remaining lease terms in excess of one year.

Year Ending June 30		mount
2003	\$	6,939
2004		6,939
2005		6,361
2006		_0-
Total minimum lease payments	\$	20,239

NOTE 10 - COMPENSATED ABSENCES

Employees of the Hospital are entitled to paid days off and sick days depending on length of service. The Hospital charged operations for accrued paid days off and vested sick pay of \$38,280, \$31,263 and \$37,301 in 2002, 2001 and 2000, respectively. It is impracticable to estimate the amount of compensation for future unvested sick pay and, accordingly, no liability has been recorded in the accompanying financial statements. The Hospital's policy is to recognize the cost of unvested sick pay when actually paid to employees.

NOTE 11 - PROFESSIONAL LIABILITY RISK

The District participates in the Louisiana Patient's Compensation Fund established by the State of Louisiana to provide medical professional liability coverage to healthcare providers. The fund provides for \$400,000 in coverage per occurrence above the first \$100,000 per occurrence for which the District is at risk. The fund places no limitation on the number of occurrences covered. In connection with the establishment of the Patient's Compensation Fund ("PCF"), the State of Louisiana enacted legislation limiting the amount of healthcare provider settlement for professional liability to \$100,000 per occurrence and limited the PCF's exposure to \$400,000 per occurrence.

The District has acquired additional coverage for professional medical malpractice liability through a private insurance carrier by purchasing a claims-made policy.

NOTE 12 - CONTINGENCIES

The District evaluates contingencies based upon the best available evidence. The District believes that no allowances for loss contingencies are considered necessary. To the extent that resolution of contingencies result in amounts which vary from the District's estimates, future earnings will be charged or credited.

The principal contingencies are described below:

Third Party Government-Based Revenues (Note 4) - Cost reimbursements are subject to examination by agencies administering the programs. Effective October 1, 1983, the Medicare program discontinued its cost-based reimbursement system for inpatient services. Under the program, the District receives a fixed fee for each patient, which is determined by the government. The District is contingently liable for retroactive adjustments made by the Medicare and Medicaid programs as the result of their examinations as well as retroactive changes in interpretations applying statutes, regulations, and general instructions of those programs. The amount of such adjustments cannot be determined.

Federal and state budget restraints are increasing the time period taken to pay Medicare and Medicaid claims and the Medicaid program is delaying payment of year-end settlements.

The healthcare industry is subject to numerous laws and regulations of Federal, state and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government healthcare program participating requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Recently, government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by healthcare providers. Violations of these laws and regulations could result in expulsion from government healthcare programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Management believes that the Hospital is in compliance with fraud and abuse statutes as well as other applicable government laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time.

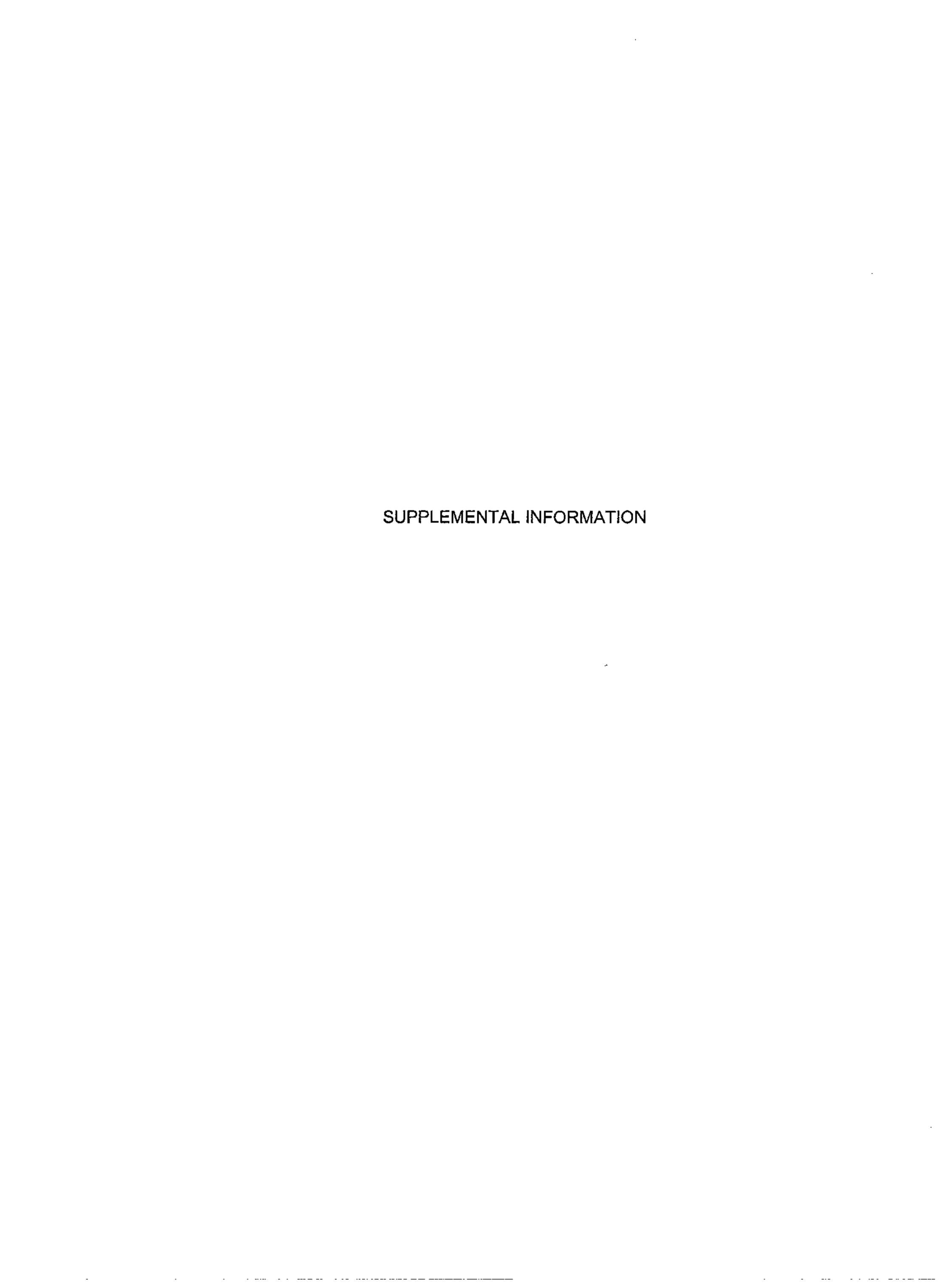
Professional Liability Risk (Note 11) - The District is contingently liable for losses from professional liability not underwritten by the Louisiana Patient's Compensation Fund.

Litigation and Other Matters - Various claims in the ordinary course of business are pending against the District. In the opinion of management and counsel, insurance is sufficient to cover adverse legal determinations in those cases where a liability can be measured.

NOTE 13 - GOING CONCERN

There are conditions or events that, when considered in the aggregate, indicate there could be substantial doubt about the District's ability to continue as a going concern for a reasonable period of time. These conditions or events include, but are not limited to the following: (1) low patient utilization of the Hospital (2) limited number of active medical staff doctors and (3) significant deficiencies noted during a state survey.

Management's plans for dealing with the adverse effects of the conditions or events identified in the previous paragraph include, but are not limited to, the continued efforts to attract physicians to increase patient utilization of the Hospital, research the possibility of becoming a Critical Access Hospital and correcting all outstanding deficiencies noted in the state survey.



Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Schedules of Net Patient Service Revenue Years Ended June 30, 2002, 2001 and 2000

	2002	2001	2000
Routine services Adult and pediatric Psychiatric	\$ 118,295 4,337,360	\$ 162,115 3,690,555	\$ 159,575 3,197,000
Swing-bed	9,070	5,265	5,400
Total routine services	<u>4,464,725</u>	<u>3,857,935</u>	<u>3,361,975</u>
Other professional services			
Radiology	192,679	216,079	192,565
Nuclear medicine	43,750	43,492	109,446
Laboratory	435,373	518,308	574,656
Blood	6,124	16,715	9,287
Intravenous therapy	48,550	74,175	73,418
Respiratory therapy	82,861	57,861	73,610
Electrocardiology	55,800	59,346	66,725
Central supply	106,960	156,485	134,445
Pharmacy	666,636	617,899	548,202
Partial day psychiatric	-0-	-0-	537,409
Sleep lab	9,000	-0-	-0-
Observation room	3,470	14,070	11,920
Contract physician	210,127	343,730	356,099
Home health visits	398,640	417,740	284,800
Oberlin health clinic	77,569	13,535	-O -
Kid med	16,135	4,930	3,682
Total other professional services	2,353,674	2,554,365	_2,976,264
Gross patient service revenues	<u>6,818,399</u>	6,412,300	<u>6,338,239</u>
Contractual adjustments	3,362,163	3,045,332	2,385,838
Medicaid disproportionate share payments	(187,926)	(85,659)	(274,514)
Discounts	51,881	37,125	36,917
Total deductions from revenue	3,226,118	2,996,798	2,148,241
Net patient service revenue	\$ <u>3.592,281</u>	\$ <u>3.415.502</u>	\$ <u>4.189.998</u>

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Schedules of Other Operating Revenue Years Ended June 30, 2002, 2001 and 2000

	2	2002		2001		2000
Meals	\$	9,127	\$	10,141	\$	8,287
Medical records transcript fees		2,812		2,672		1,606
Miscellaneous rental		5,525		7,800		7,150
Related party 60% loss (income) share		-0-		-0-		(230,251)
Grant income		-0-		105,000		50,000
Debt forgiveness		50,345		-0-		300,000
Other income		12,637	_	25,375	_	<u> 17,838</u>
Total other operating revenue	\$	80,446	\$	150,988	\$_	154,630

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital

Schedules of Operating Expenses - Salaries and Benefits Years Ended June 30, 2002, 2001 and 2000

	2002	2001	<u>2000</u>
Administration Plant operations and maintenance Housekeeping Dietary and cafeteria Medical records Nursing services, acute care Psychiatric unit Radiology Laboratory Respiratory therapy Central supply Pharmacy Partial day psychiatric Home health Oberlin health clinic Contract physician	\$ 151,95 50,725 34,725 80,735 30,335 298,235 572,266 82,026 48,87 9,17 7,955 -0 185,04 148,60 139,92	52,952 34,169 77,131 4 23,817 3 335,496 0 563,059 6 69,130 49,019 1 34,314 1 11,640 9 10,288 00- 9 165,209 3 37,778	7,326 60,612 137,875 -0-
Total salaries	1,899,00	1 1,838,480	1,682,277
Payroli taxes	149,98	<u>6</u> <u>155,520</u>	<u>125,383</u>
Total salaries and benefits	\$ <u>2,048,98</u>	<u>7 \$ 1,994,000</u>	\$ <u>1.807,660</u>

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Schedules of Operating Expenses - Other Expenses Years Ended June 30, 2002, 2001 and 2000

	2002	20	2001		000
Legal and accounting	\$ 44,656	\$	52,179	\$	81,998
Repairs and maintenance Telephone	51,583 61,599		57,413 65,558		37,684 57,376
Utilities	61,530		76,192		63,501
Travel	47,522		50,959		53,163
Rentals	28,448		30,465		36,060
Dues and subscriptions	11,853	•	14,382		5,328
Miscellaneous	14,259		<u> 19,506</u>		<u>37,839</u>
Total other expenses	\$ <u>321.450</u>	\$	<u>366,654</u>	\$	372,949

Hospital Service District No. 3 Of the Parish of Allen, State of Louisiana Allen Parish Hospital Schedules of Per Diem and Other Compensation Paid to Board Members Years Ended June 30, 2002, 2001 and 2000

	200	2002		2001		<u>)Q</u>
Board Members:						
Mr. E. O. Alexander	\$	N/A	\$	N/A	\$	40
Mr. Jimmy Savoie		N/A		N/A		200
Mr. Cecil Ashford		N/A		N/A		400
Dr. Peggy Allemand		480		440		N/A
Mr. Danny Taylor		N/A		N/A		160
Mr. Charles Welch		N/A		N/A		320
Mrs. Carla Marcantel		440		480		400
Mr. Matt Martin		480		480		240
Mr. Ike Fawcett		N/A		N/A		40
Mr. Ronald Craiger		480		440		80
Mr. Thomas Nevils		360		280		40
Mr. Jessie Chaffin		440		440		80
Mr. Richard Hollier	,	400		440		40
Total	\$	3,080	\$	3,000	\$	2.040

Bobby G. Lester, CPA
John S. Wells, CPA
Robert G. Miller, CPA
Paul A. Delaney, CPA

Melanie I. Layssard, CPA Brenda J. Lloyd, CPA

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REPORT ON COMPLIANCE AND ON INTERNAL CONTROL OVER FINANCIAL REPORTING BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Commissioners Hospital Service District No. 3 Parish of Allen, State of Louisiana Kinder, Louisiana

We have audited the general purpose financial statements of the Allen Parish Hospital Service District No. 3 (the "District"), as of and for the years ended June 30, 2002, 2001 and 2000, and have issued our report thereon dated November 6, 2002. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States.

Compliance

As part of obtaining reasonable assurance about whether the District's general purpose financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audits and, accordingly, we do not express such an opinion. The results of our test disclosed one instance of noncompliance that is required to be reported under <u>Government Auditing Standards</u>.

Internal Control Over Financial Reporting

In planning and performing our audits, we considered the District's internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinion on the general purpose financial statements and not to provide assurance on the internal control over financial reporting. Our consideration of the internal control over financial reporting would not necessarily disclose all matters in the internal control over financial reporting that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts that would be material in relation to the general purpose financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over financial reporting and its operation that we consider to be material weaknesses.

Board of Commissioners Hospital Service District No. 3 Parish of Allen, State of Louisiana Page Two

This report is intended solely for the information and use of the Board of Commissioners, management and the office of the Legislative Auditor of the State of Louisiana and is not intended to be and should not be used by anyone other than those specified parties. However, this report is a matter of public record and its distribution is not limited.

Certified Public Accountants

Lester Miller & Wells

November 6, 2002

1999 Internal Control Findings and Recommendations

1. <u>Finding</u>: Medicare requires vendor payables to be liquidated within one year of the balance sheet date, unless the provider can obtain an exception from the intermediary. During the year ended June 30, 1999, we noticed that the District has delayed payments to some vendor accounts.

Recommendation: We recommend paying vendors timely or obtain a written exception for payables that cannot be paid within one year of the balance sheet date.

Response: The balances owed to vendors are being negotiated for timely settlement.

Resolution: This matter is partially resolved. One vendor payable at June 30, 2001 was not liquidated within one year of the balance sheet date.

2000 Internal Control Findings and Recommendations

1. <u>Finding:</u> In an open letter to Medicare and Medicaid providers and in numerous public statements, the U. S. Health and Human Services Inspector General and others in her office have made it clear that such providers should (but are not required) establish corporate compliance programs. The Office of Inspector General ("OIG") generally has taken the position that indifference (a failure to pro-actively maintain a system to avoid errors) that results in violations is similar to intentional violations and that lack of knowledge is not a defense. The OIG has stated that, when it finds a violation it will make every effort to enforce the maximum penalty when corporate compliance plan is not in place. When such a plan is in place (and actually working in the daily operations as opposed to being a document on a shelf), it has stated that it will give consideration to the providers' efforts to avoid violations. The District has not implemented a corporate compliance program.

Recommendation: We recommend that the District implement and maintain a corporate compliance plan.

Response: The District is currently developing a corporate compliance program.

Resolution: This matter has been resolved.

2001 Compliance Findings and Recommendations

1. <u>Finding</u>: The District entered into a capital lease agreement without obtaining a non-appropriation clause or State Bond Commission approval. Additionally, the District entered into a note payable agreement without obtaining State Bond Commission approval.

Recommendation: We recommend obtaining either non-appropriation clause on all new capital lease agreements or State Bond Commission approval. We also recommend obtaining State Bond Commission approval on the note payable.

Response: Management will obtain a non-appropriation clause or State Bond Commission approval for the capital lease agreement and monitor new agreements to ensure the clause is present. They will obtain State Bond Commission approval for the note payable and monitor future note payables to ensure approval is present.

Resolution: This matter has been resolved.

2002 Compliance Findings and Recommendations

Finding: The District was found to be out of compliance with Medicare Conditions of Participation.
 Termination action was taken against the District.

Recommendation: We recommend implementing plans and procedures to correct the deficiencies and the processes that led to the deficiencies.

Response: Management is reviewing the deficiencies and the reasons they occurred. They will plan and implement corrective procedures to clear the deficiencies and prevent non compliance in the future. They will present their plan to the Department of Health and Human Services for approval.

. . .---

Resolution: This matter has been resolved.
